

Supplemental Application Data Sheet

Application Information

Application number:: 10/583,503
Filing Date:: ~~June 16, 2006~~ 11/17/06
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission:: Paper
Computer Readable Form (CRF)?:: Yes
Number of copies of CRF:: 1
Title:: A-BETA IMMUNOGENIC PEPTIDE CARRIER
CONJUGATES AND METHODS OF
PRODUCING SAME
Attorney Docket Number:: CA151815270C-000110US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 10
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type: Inventor
Primary Citizenship Country: US
Status: Full Capacity
Given Name: Rasappa G.
Middle Name:
Family Name: ARUMUGHAM
Name Suffix:
City of Residence: Chapel Hill
State or Province of Residence: NC
Country of Residence: US
Street of Mailing Address: 102 Barton Lane
City of Mailing Address: Chapel Hill
State or Province of mailing address: NC
Country of mailing address: US
Postal or Zip Code of mailing address: 27516

Applicant Authority Type: Inventor
Primary Citizenship Country: India
Status: Full Capacity
Given Name: A. Krishna
Middle Name:
Family Name: PRASAD
Name Suffix:
City of Residence: Chapel Hill
State or Province of Residence: NC
Country of Residence: US
Street of Mailing Address: 105 Worsham Drive
City of Mailing Address: Chapel Hill

State or Province of mailing address:: NC
Country of mailing address:: US
Postal or Zip Code of mailing address:: 27516

Correspondence Information

Correspondence Customer Number:: 2349320350
Phone number:: (650) 625-8100
Fax number:: (650) 625-8110
E-Mail address:: sughrue@sughrue.com

Representative Information

Representative Customer Number:: 2349320350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Application claiming the benefit under 35 USC § 371	<u>PCT/US2004/44093</u> <u>3PCT/US04/44093</u>	12/17/04
<u>PCT/US2004/44093</u> <u>PCT/US04/44093</u>	An Application claiming the benefit under 35 USC § 119(e)	60/530,481	12/17/03

Foreign Priority Information

Country:: Application number:: Filing Date::

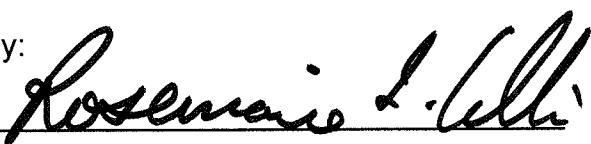
Assignee Information

Assignee Name:: Janssen Alzheimer Immunotherapy
Street of mailing address:: Little Island Industrial Estate
City of mailing address:: Little Island
State or Province of mailing address:: County Cork
Country of mailing address:: IE
Postal or Zip Code of mailing address::

Assignee Name:: Wyeth
Street of mailing address:: Five Giralda Farms
City of mailing address:: Madison
State or Province of mailing address:: New Jersey
Country of mailing address:: US
Postal or Zip Code of mailing address:: 07940

Submitted by:

Signature



Date

11/16/09

Printed Name

Rosemarie L. Celli

Registration Number

42,397